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46th Legislative District
Baltimore City

Chair
Health and Government
Operations Committee

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THE MARYLAND HEALTH
CARE COMMISSION

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THE MARYLAND HOUSE OF DELEGATES
ANNAPOLIS, MARYLAND 21401

February 6, 2014

Dr. Craig Tanio, Chairman
Maryland Health Care Commission
4160 Patterson Avenue
Baltimore, MD 21215

Dear Dr. Tanio:

This letter conveys the comments of the House Health and Government Operations Committee on the proposed Cardiac Surgery and Percutaneous Coronary Intervention Services regulations pursuant to Section 7 of Chapter 418 of the Laws of 2012.

The Committee questions the authority of the Maryland Health Care Commission through regulations to require the voluntary relinquishment of a cardiac surgery services CON. Chapter 418 of 2012 specifically authorizes the Commission to require voluntary relinquishment of the authority to provide emergency or elective PCI services, as part of a certificate of conformance or ongoing performance, if the acute hospital (without on-site cardiac surgery services) fails to meet applicable standards of the Commission. A reference to cardiac surgery services, pertaining to voluntary relinquishment, was struck from the bill. Language was also added that made clear that voluntary relinquishment only applies to PCI programs at acute care hospitals without on-site cardiac surgery services.

The Committee believes that there should be specific legislative statutory authorization in order for the Commission to have the authority to revoke or require voluntary relinquishment of a CON for cardiac surgery services.

Notwithstanding the previous comments, the Committee has concerns regarding the process envisioned by the Commission for certificates of conformance and performance for cardiac surgery services as they relate to Prince George's Hospital. The State has a significant investment in the hospital in terms of general and capital funds. For example, from fiscal 2002 to fiscal 2007 the State provided the hospital \$15.8 million, and from fiscal 2009 to fiscal 2011, the State provided the hospital \$39 million. Since fiscal 2012, the hospital has been receiving an annual operating subsidy of \$15 million. In addition, the State has committed \$200 million in capital funds to construct a new facility. The Committee understands that current volumes for cardiac surgery are extremely low at Prince George's Hospital, but hopes the process for obtaining certificates of conformance and performance for that hospital would take into account the State's investment and allow the hospital the 3 to 5 years it needs to build a program that meets Commission minimum standards for a quality program.

More specifically, with regard to Prince George's Hospital, the Committee requests:

- any review of a cardiac surgery program be prospective and over a two year period;
- an opportunity for a hospital to respond to any deficiencies and to prepare a plan of correction without automatic relinquishment of a cardiac surgery program;
- any new applicant for a cardiac surgery program be required to demonstrate need and the impact its new program would have on the hospitals and cardiac services programs in its region and adjoining regions; and
- MHCC require clinical expertise in the review of any cardiac surgery program.

The Committee agrees with Anne Arundel Medical Center's (AAMC) request to restore the original proposed language for "Need," section (a), under the Cardiac Surgery Standards portion of the proposed regulations. Specifically, AAMC would prefer that "...projected demand for cardiac surgery by the population to be served, rather than "in its service area."

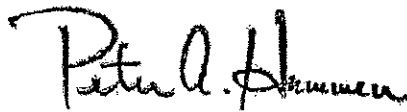
The Committee also has concerns with the proposed annual external review of PCI cases. If a hospital has a problem, a year is too long to wait for an external review. We believe a quarterly external review may be more appropriate, though some adjustment may be necessary to assure a sufficient sample size.

Finally, the Committee agrees with Carroll Hospital Center, which is seeking a certificate for elective PCI, that the process for finalizing the regulations proceed as expeditiously as possible.

Senator Middleton, Delegate Pendergrass, and I had a very productive meeting with your staff and representatives of the University of Maryland Medical System earlier this week to discuss these issues. I am confident that the proposed cardiac services regulations will address all of the Committee's concerns.

Thank you for your attention and consideration of this important matter.

Sincerely,

A handwritten signature in black ink, reading "Peter A. Hammen". The signature is written in a cursive, flowing style.

Peter A. Hammen
Chair, House Health and Government Operations Committee

cc: Members of the House Health and Government Operations Committee
Mr. Ben Steffen, Executive Director, MHCC
Ms. Erin Dorrien, MHCC